FORM 1-1	1-5		
PORM 1-1	1-3		
	PATENT		
Attorney's Docket NoA2711			
COMBINED DECLARATION AND PO	WER OF ATTORNEY		
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPL CIP)	LEMENTAL, DIVISIONAL, CONTINUATION OR		
As a below named inventor, I hereby declare that:			
TYPE OF DECLARATION			
This declaration is of the following type: (check one applical	ble item below)		
☐ Original			
design			
Note: if the declaration is for an International Application bein part application do <u>not</u> check any of next two items and check			
national stage of PCT supplemental			
Note: if one of the following 3 items apply then complete and a CONTINUATION OR CIP.  Divisional continuation continuation-in-part (CIP)	also attach ADDED PAGES FOR DIVISIONAL,		
INVENTORSHIP IDI	ENTIFICATION		
WARNING: if the inventors are each not the inventors of all the ownership of all the claims at the time the last claimed invention			
My residence, post office address and citizenship are as state first and sole inventor (if only one name is listed below) or a listed below) of the subject matter which is claimed and for	an original first and joint inventor (if plural names are		
TITLE OF IN	VENTION		
PARKING BRA	AKE S		
SPECIFICATION ID	ENTIFICATION		
the specification of which: (complete (a), (b) or (c)			
(a) is attached hereto (b) was filed on	Serial No		
or Express Mail No. as Serial No. not yet known	and was amended		
NOTE: Amendments filed after the original papers are deposite			

accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37CFR 1.67

(Declaration and Power of Attorney [1-1]-page 1 of 5)

(c) was descri 2004 .and as ame	bed and claimed in PCT Int nded under PCT Article 19	ernational Application No.PCT/IB on(if any)	2004/003423 filed on 18 October	
ACKNOV	LEDGEMENT OF I	REVIEW OF PAPERS AN	D DUTY OF CANDOR	
	t I have reviewed and under d by any amendment referre		ntified specification, including the	
	duty to disclose information	on which is material to the examina gulations. § 1.56(a).	tion of this application in	
In compliance with this duty there is attached an information disclosure statement. 37 CRF 1.97.				
	I	PRIORITY CLAIM		
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.				
		(complete (d) or (e))		
(d) no such applications have been filed such applications have been filed as follows				
NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.				
EARLIEST FOREIGN APPLICATION(S) IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION				
COUNTRY	APPLICATION	DATE OF FILING	PRIORITY CLAIMED	
- CP	NUMBER	(month, day, year)	UNDER 37 USC 119	
GB	0324571.9	22 <sup>nd</sup> October 2004	YES N	
		_		
A		ON(S), IF ANY FILED MORE TI		
	(6 MONTHS FOR DE	SIGN) PRIOR TO THIS U.S. API	PLICATION	
	-	(Declaration and Po	ower of Attorney [1-1]-page 2 of 5)	
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# POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trade Mark Office connected therewith. (List name and registration number)

BAUL E MILLIKEN RAY L WEBER Registration No. 22,403 Registration No. 26,519

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Paul E Milliken 9061 Wall Street, NW Massillon, OH 44646-1676 Paul E Milliken (330) 830-1555

#### **DECLARATION**

I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

### **SIGNATURE(S)**

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Inventor's signature
DateCountry of Citizenship
ResidenceCairo Montenotte
Post Office Address
(Declaration and Power of Attorney [1-1]-page 3 of 5)

# **DECLARATION**

# CHECK PROPER BOX(ES) IF ANY OF THE FOLLOWING ADDED PAGE(S) FORM A PART OF THIS DECLARATION

FART OF THIS DECLARATION
Signature for third and subsequent joint inventors. Number of pages added1
Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added
Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47 Number of pages added
* * *
Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.
☐ Number of pages added
* * *
no further pages form a part of this Declaration then end this Declaration with s page and check the following item.
This declaration ends with this page
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